

MARK CHRISTIANS #35285

Name and Prisoner/Booking Number

JAMESON ANNEX - SDSP

Place of Confinement

PO Box 5911

Mailing Address

Sioux Falls, SD 57117

City, State, Zip Code

UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH DAKOTA
SOUTHERN DIVISION

MARK ANTHONY CHRISTIANS,
(Full Name of Plaintiff)

Case No. 22-cv-4072

(To be supplied by the Clerk)

Plaintiff,

vs.

NANCY CHRISTENSEN, LAURIE STRATMAN,

DARIN YOUNG, JESSICA COOK, DEREK EKEREN,

ANGELA

JENNIFER DRIESKE, PECHNOUS, GENIE BIRCH,

GREASMAN, BARNETTIE, MARTAMA, WINTERS,

(Full Name of Each Defendant)

MULLINS, HULSCHER, DAWN ALUMBAUGH, LIEUTENANTS BECKER, LT. HETTING,
FORMERLY LT. PERRET, Defendants. BETH, SUMMIT FOOD SERVICE, SETH HUGHES
CATHY WYNIA

CIVIL RIGHTS COMPLAINT
BY A PRISONER

Original Complaint

First Amended Complaint

Second Amended Complaint

A. JURISDICTION

1. This Court has jurisdiction over this action pursuant to:

- a. 28 U.S.C. § 1343(a)(3); 42 U.S.C. § 1983
- b. 28 U.S.C. § 1331; *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971).
- c. Other: (Please specify.) _____

2. Name of Plaintiff: MARK CHRISTIANS

Present mailing address: SDSP-JAMESON ANNEX PO BOX 5911 Sioux Falls SD 57117

(Failure to notify the Court of any change of address may result in dismissal of this action.)

Institution/city where violation occurred: SOUTH DAKOTA STATE PENITENTIARY

JAMESON ANNEX - SIOUX FALLS
MICHAEL DURFEE'S STATE PRISON - SPRINGFIELD

3. Name of first Defendant: NANCY CHRISSENSEN. The first Defendant is employed as:
RETired UNIT MANAGER at MIKE DURFEE STATE PRISON.
(Position and Title) (Institution)

This Defendant is sued in his/her: individual capacity official capacity (check one or both)

Explain how this Defendant was acting under color of law: EMPLOYEE OF STATE.

4. Name of second Defendant: Laurie STRATMAN. The second Defendant is employed as:
UNIT COORDINATOR at MIKE DURFEE STATE PRISON.
(Position and Title) (Institution)

This Defendant is sued in his/her: individual capacity official capacity (check one or both)

Explain how this Defendant was acting under color of law: EMPLOYEE OF STATE.

5. Name of third Defendant: DARIN YOUNG. The third Defendant is employed as:
TERMINATED WARDEN at SDSP.
(Position and Title) (Institution)

This Defendant is sued in his/her: individual capacity official capacity (check one or both)

Explain how this Defendant was acting under color of law: EMPLOYEE OF STATE.

6. Name of fourth Defendant: JESSICA COOK. The fourth Defendant is employed as:
ASSOCIATE WARDEN at SDSP.
(Position and Title) (Institution)

This Defendant is sued in his/her: individual capacity official capacity (check one or both)

Explain how this Defendant was acting under color of law: EMPLOYEE OF STATE.

(If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.)

B. PREVIOUS LAWSUITS

1. Have you filed any other lawsuits while you were a prisoner? Yes No
2. If your answer is "yes," how many lawsuits have you filed? ONE. Describe the previous lawsuits in the spaces provided below.
3. First prior lawsuit:
 - a. Parties to previous lawsuit:
Plaintiff: MARK CHRISTIAN

DEREK EKREN - UNIT MANAGER AT JAMESON - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

JENNIFER DRIESKE - TERMINATED DEPUTY WARDEN AT SDSA - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

ANGELA PECHOUS - UNIT ~~MANAGER~~ COORDINATOR AT JAMESON - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

SETH HUGHES - UNIT MANAGER AT JAMESON - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

GENIE BIRCH - UNIT CASE MANAGER AT JAMESON - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

• GREASEMAN - CO AT JAMESON - INDIVIDUAL AND OFFICIAL STATE EMPLOYEE

BARNETCHE - CO AT JAMESON - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

MARYAMA - CO AT JAMESON - INDIVIDUAL AND OFFICIAL STATE EMPLOYEE

WINTERS - CO AT JAMESON - INDIVIDUAL AND OFFICIAL - STATE EMPLOYEE

MULLINS - CO AT JAMESON - INDIVIDUAL AND OFFICIAL STATE EMPLOYEE

HULSCHER & CO AT JAMESON - INDIVIDUAL AND OFFICIAL STATE EMPLOYEE

DAWN ALUMBAUGH - CO AT JAMESON - INDIVIDUAL AND
OFFICIAL - STATE EMPLOYEE

LIEUTENANT BECKER - LT. AT JAMESON - INDIVIDUAL AND
OFFICIAL - STATE EMPLOYEE

LIEUTENANT HETTING - LT. AT JAMESON - INDIVIDUAL AND OFFICIAL -
STATE EMPLOYEE

FORMER LT. PERRET - LT. AT JAMESON - INDIVIDUAL AND OFFICIAL -
STATE EMPLOYEE

BETH - SUMMIT SUPERVISOR AT JAMESON - INDIVIDUAL AND
OFFICIAL - STATE CONTRACTOR EMPLOYEE

SUMMIT FOOD SERVICE - FOOD PROVIDER AT JAMESON - INDIVIDUAL
AND OFFICIAL - STATE CONTRACTOR

CATHY WYNIA - SPECIAL SECURITY AT SDSP - INDIVIDUAL AND
OFFICIAL - STATE EMPLOYEE

Defendants: DARRIN YOUNG, ET AL.

b. Court: (If federal court, identify the district; if state court, identify the county.) _____

SOUTHERN DISTRICT OF SOUTH DAKOTA

c. Case or docket number: 4:20-CV-04083-LLP

d. Claims raised: FIRST AND EIGHTH AMENDMENT

e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)

STILL PENDING

f. Approximate date lawsuit was filed: NOV. 3, 2020

g. Approximate date of disposition: STILL PENDING

4. Second prior lawsuit:

a. Parties to previous lawsuit:

Plaintiff: _____

Defendants: _____

b. Court: (If federal court, identify the district; if state court, identify the county.) _____

c. Case or docket number: _____

d. Claims raised: _____

e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)

f. Approximate date lawsuit was filed: _____

g. Approximate date of disposition: _____

5. Third prior lawsuit:

a. Parties to previous lawsuit:

Plaintiff: _____

Defendants: _____

b. Court: (If federal court, identify the district; if state court, identify the county.) _____

c. Case or docket number: _____

d. Claims raised: _____

e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)

f. Approximate date lawsuit was filed: _____

g. Approximate date of disposition: _____

(If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.)

C. CAUSE OF ACTION

COUNT I

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

FIRST AND FOURTEENTH AMENDMENTS

EIGHTH AMENDMENT

2. Count I involves: (Check **only one**; if your claim involves more than one issue, each issued should be stated in a different count)

<input type="checkbox"/> Disciplinary proceedings	<input checked="" type="checkbox"/> Retaliation	<input type="checkbox"/> Medical care	<input type="checkbox"/> Access to the court	<input type="checkbox"/> Mail
<input type="checkbox"/> Excessive force by an officer	<input type="checkbox"/> Threat to safety	<input type="checkbox"/> Exercise of religion	<input type="checkbox"/> Property	<input type="checkbox"/> Other: _____

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count I. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

NANCY CHRIS NENSEN TOLD ME SHE WOULD KILL ME IF I FILED ANYMORE FOOD GRIEVANCES BECAUSE I WAS MAKING HER LIFE DIFFICULT AND IT WOULD BE EASIER TO GET RID OF ME. WHEN I ASKED HER HOW SHE WOULD KILL ME SHE SAID SHE WOULD PUT POISON IN MY COFFEE OR POWDERED MILK AND THAT SHE KNEW WHERE I KEEP THEM IN MY ROOM. LAURIE STRATMAN SAID SHE WOULD FIND A WAY TO GET RID OF ME IF I DIDN'T STOP FILING GRIEVANCES ON THE FOOD. WHEN CHARGED WITH AN H-7 DISCIPLINARY REPORT BOTH DARIN YOUNG AND JESSICA COOK TOLD ME I WAS CHARGED BECAUSE I WAS FILING TOO MANY GRIEVANCES ON THE FOOD AND I HAD TO BE INVOLVED. DEREK EKEREN SAID HE THREW AWAY MY JOB APPLICATION BECAUSE I FILED A GRIEVANCE ON HIM AND SAID HE WOULD MAKE SURE I DIDN'T GET A JOB AT P.F. AFTER FILING GRIEVANCES EKEREN BEGAN TO CHOKE ME IN HIS OFFICE WITH BOTH HANDS AROUND MY THROAT.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

I WAS PREVENTED FROM EARNING A MINIMUM WAGE JOB MAKING \$15.00 AN HOUR OR MORE AND WAS ASSAULTED TO THE POINT I LOST CONSCIOUSNESS.

5. **Administrative Remedies:**

a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? Yes No

b. Did you submit a request for administrative relief on Count I? Yes No

c. Did you appeal your request for relief on Count I to the highest level? Yes No

d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. I WAS THREATENED WITH MANY FORMS OF VIOLENCE AND RETALIATION AND WAS SCARED FOR MY LIFE. I DID FILE GRIEVANCES ON THE H-7 WHILE I WORKED.

COUNT 1

WHEN I LOST CONSCIOUSNESS AND CAME TO EVEREN SAID NEXT TIME HE WOULD KILL ME IF I FILED ANOTHER GRIEVANCE. JESSICA COOK SAID SHE WOULD MAKE SURE I NEVER GOT A JOB AT P.I. BECAUSE I FILED TOO MANY GRIEVANCES. JENNIFER DRIESKE SAID SHE WOULD MAKE SURE I GOT TRANSFERRED TO AN OUT OF STATE PRISON WHERE INMATES GET STABBED. DARIN YOUNG TOLD ME HE WOULD TRANSFER ME TO A PRISON WHERE I WOULD BE KILLED OVER FOOD. SETH HUGHES ALSO SAID I WOULD BE TRANSFERRED TO A MUCH MORE DANGEROUS PRISON IF I DIDN'T STOP MY FOOD PROTESTS. ^{IN APRIL 2021, CATHY WARM} WHERE SHE REPLIED ON CHRISMAN'S WITH NO EVIDENCE OTHER THAN WHEN SHE QUESTIONED CHRISMAN'S ABOUT HIS FOOD GRIEVANCES AND LAWSUIT ABOUT FOOD.

NANCY CHRISSENSEN ALSO WROTE ME UP FOR ASSAULT WHICH WAS FABRICATED. I WAS NOT GIVEN A FAIR, IMPARTIAL HEARING. ON THE H-7 I WAS WRITTEN UP FOR FOR FILING GRIEVANCES I PLEAD NOT GUILTY AND ASKED FOR A DHO HEARING BUT WAS NOT GRANTED ONE. DITMINSON TOLD ME THE WRITE-UP WOULD BE DISMISSED AND LET ME OUT OF THE SHU. I LATER FOUND OUT THEY CLASSIFIED ME AS GUILTY EVEN THO I ASKED FOR A DHO HEARING. I FILED GRIEVANCES ON THIS.

COUNT II

1. The following constitutional or other federal right has been violated by the Defendant(s): _____
EIGHTH AMENDMENT.

2. Count II involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)
- | | | | |
|---|---|---|-----------------------------------|
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Retaliation | <input type="checkbox"/> Access to the court | <input type="checkbox"/> Mail |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Property |
| <input checked="" type="checkbox"/> Other: <u>NUTRITION</u> | | | |

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count II. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

I LOST 21 POUNDS IN 14 DAYS WHEN HELD IN THE SHU BECAUSE I WAS NOT REGULARLY BROUGHT COMPLETE MEALS BY STAFF I COMPLAINED TO GRIESMAN, PECHOUR, GERIE BERCH, BARNETT, MARJAM, WINTERS, MULINS, HUSCHER AND SEVERAL LIEUTENANTS AND SENT KINES TO THE SUMM KITCHEN SUPERVISOR ABOUT INAPPROPRIATE MEALS WITH MOST ITEMS MISSING OR VERY SMALL PORTIONS. NOTHING WAS DONE FOR SEVERAL WEEKS. I SPOKE TO SETH HUBBES ABOUT THIS SEVERAL TIMES AND FILED GRIEVANCES BUT HE DID NOTHING TO CHANGE WHAT WAS HAPPENING. THERE WAS INADEQUATE NUTRITION THROUGH THE LACK OF CALORIES CAUSED BY MISSING FOOD. CALORIES WERE ONLY 500-1000 CALORIES PER DAY.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

I LOST 21 POUNDS IN 14 DAYS, HUNGER PAINS, LOSS OF SLEEP, MENTAL ANXIETY, WEAKNESS, FATIGUE, MUSCLE ATROPHY.

5. **Administrative Remedies:**

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? Yes No
- Did you submit a request for administrative relief on Count II? Yes No
- Did you appeal your request for relief on Count II to the highest level? Yes No
- If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. _____

COUNT III

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

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2. Count III involves: (Check **only one**; if your claim involves more than one issue, each issued should be stated in a different count) Medical care Access to the court Mail
 Disciplinary proceedings Retaliation Exercise of religion Property
 Excessive force by an officer Threat to safety Other: _____

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count III. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

- ## **5. Administrative Remedies:**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? Yes No

b. Did you submit a request for administrative relief on Count III? Yes No

c. Did you appeal your request for relief on Count III to the highest level? Yes No

d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not.

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

D. REQUEST FOR RELIEF

State briefly what you want the Court to do for you.

\$150,000 IN COMPENSATORY DAMAGES FOR NOT BEING ALLOWED TO WORK A PREMIUM JOB, \$100,000 IN PUNITIVE DAMAGES, TERMINATION OF EMPLOYEES, A PUBLIC APOLOGY, FIX THE NUTRITION SITUATION IN JUNIOR AND DECLARATORY RELIEF, JOB MAKING AT LEAST MINIMUM WAGE AS I COULD HAVE HAD FOR THE LAST THREE YEARS IF NOT FOR THE RETALIATION

I declare under penalty of perjury that the foregoing is true and correct.

Executed on MAY 31, 2022
DATE



SIGNATURE OF PLAINTIFF

(Name and title or paralegal, legal assistant, or other person who helped prepare this complaint)

(Signature of attorney, if any)

(Attorney's address & telephone number)

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If needed, you may attach additional pages. The form, however, must be completely filled in to the extent applicable.

MARK CHRISTIANS #35285
DEPARTMENT OF CORRECTIONS
STATE PENITENTIARY
P.O. Box 5911
Sioux Falls, SD 57117-5911
Address Service Requested

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06/02/2022
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OFFICE OF THE CLERK
400 S. PHILLIPS AVE. Room #128
SIOUX FALLS, SD 57104

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